2000 UNIFORM BUSINESS REPORT (UBR)								
DOCUMENT # A29018 1. Entity Name						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
RIDGECREST VILLAGE, LTD.						DIVISION OF CORPORATIONS		
Principal Place of Business Mailing Address						00 APR 10 PH 12: 59		
6108 - 26TH STREET W.6108 - 26TH STREET W.								
SUITE 2 SUITE 2 BRADENTON FL 34207 BRADENTON FL 34207-4474			207-4474				011 41414 01811 41814 01811 42021 01812 1881	
2. Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRITE I	· · · · · · · · · · · · · · · · · · ·	
City & State City & State				4. FEI Number 65-0209829 Applied For Not Applicable				
Zip Country		Zip	Zip Country		5. Certifica	te of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				Name		d Address of New Regi	stered Agent	
RIDGECREST DEVELOPMENT & MANAGEMENT, INC.				Street Address (P.O. Box Number is Not Acceptable)				
6108 - 26TH STREET WEST					·			
SUITE 2 BRADENTON FL 34207				City			FL Zip Code	
 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 								
SIGNATURE								
9. Capital Contributions \$525,000,00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE								
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.								
NOTE: General Partners MAY NOT be changed on the form; an amendme 12. GENERAL PARTNER INFORMATION 13.						ADDRESS CHANG		
DOCUMENT #	CUMENT / L16929 ME REDGECREST DEVELOPMENT & MANAGEMENT, INC. REET ADDRESS 6108 - 26TH ST.W., S-2			eet address				
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7 TEET ADDRESS			СЛҮ	'∙ST-ZIP				
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes								
SIGNATURE: BY SIGNATURE AND TYPED OR PRINTED NAME OF SIGN								